

one a girl aged nine, took twenty-seven grains a day apparently for a week; the other, a boy aged six, took eighteen grains daily for the same time. In both very speedy relief occurred. In the same journal instances of a child aged three years taking eighteen grains, and of another child aged four, taking twenty-four grains a day are given.

“Dr. Gibb gives two or three grains thrice daily to infants, and four, eight, or even ten grains, as frequently to older children.

“I have not prescribed a larger dose than twelve grains in the day, but I have given that amount with benefit in cases of the age of four, three, and two and a half years. Eight grains a day I have given to children two and three years old. In one instance a child of two years old, by mistake on the part of its mother, was given, without injurious effect, fifteen grains a day for four days, but this large dose was not attended by a better result than usual. Drs. Gibb and Harley prescribe it thrice daily in water. I prefer giving it four times a day with syrup. If bronchial irritation exists, a mixture of ipecacuanha and squill is required. Dr. Gibb is also of this opinion. In complicated cases the administration of an emetic I find to be frequently necessary.

“4th. In what cases is it suitable? * * * Having used the preparation in upwards of twenty cases, if I may be allowed to express an opinion upon this head, it would be—that the great efficacy of the drug is in uncomplicated cases—that in those complicated with acute bronchitis or pneumonia, the benefit is so trifling that I prefer other methods of treatment—that in my experience, infants are more liable to such complications than children above the age of two years. To this I consider it to be due, that in the former the benefit from the remedy is less than in the latter—for an acutely congested condition of the air-passages appears to lessen the effect of the bromide as a laryngeal anæsthetic. That the more frequent the paroxysms of hooping, the more marked and rapid is the relief; that greater relief appears to be experienced in those of some continuance than in recent cases; and, lastly, that when chronic bronchitis is present, the bromide should not be given alone, but combined with squill and ipecacuanha mixture, and occasionally with an emetic.

“I have not observed that the bromide of ammonium has any tendency to cause nausea, or that it has any effect on the mental powers. In none of the cases in which I prescribed it have convulsions occurred.”

14. *Bromide of Potassium in Coryza, Dysphagia, and Spasmodic Cough.*—The anæsthetic effects of the bromide of potassium on the soft palate are now well known to surgeons. M. GUBLER conceives that this singular property might be taken advantage of in the treatment of various morbid conditions, and states that with this remedial agent he had succeeded in modifying in the most favourable manner coryza, angina, painful deglutition, and even spasmodic paroxysms of coughing, which occasion so much distress to persons labouring under laryngo-bronchitis and pulmonary tuberculosis.

The following is M. Gubler's prescription: R.—Potassii bromidi, 3ij; aquæ destill. 3v. Distilled water must be used, and the mixture preserved in stoppered bottles; if this precaution is omitted, the solution becomes turbid and offensive. A tablespoonful morning and evening is the usual dose.

We shall revert on some future occasion to the therapeutic effects of the bromide in chest affections, but we will at present confine our observations to the prompt relief afforded by this remedial agent in consumption, when, from ulceration of the fauces, deglutition has become so painful as to deter the patient from the use of food. M. Gubler relates the case of a Zouave affected with tuberculosis, who voluntarily abstained from taking nutriment in order to avoid the torture coincident with deglutition. Half a drachm of bromide of potassium was exhibited, and immediately improved his condition. He was, after twenty-four hours, enabled to swallow bread and chicken without pain, and survived for a twelvemonth. The bromide, in such cases, is therefore a valuable sedative, and will be found efficacious for the cure of glandular angina unconnected with tuberculosis, and caused by local irritation or exposure to cold, and also for herpetic and arthritic sore-throat. M. Gubler's researches also point to the beneficial effects of the drug in the second stage of uncomplicated inflammatory

angina, when the contraction of the pharynx and fauces retains sufficient intensity to compel the patients to abstain from food, and when, therefore, long and tedious convalescence, if not exhausting disease, such as diffused asthenic paralysis, may be expected to follow.—*Ranking's Abstract*, vol. xl., from *Journ. de Méd. et Chir. Prat.*, Aug. 1864.

15. *Cure of Hooping-Cough by Ergot.*—A boy, six years of age, under the care of Dr. GRIEOPENKEL, in 1856, had had hooping-cough for a fortnight, when he was attacked by the convulsive symptoms of ergotism, which was at that time epidemic in the commune of Lutter. From the first appearance of these symptoms the fits of coughing ceased, and were replaced by simple whistling inspirations. At the end of a few days, when the child was cured of the ergotism, he was found at the same time cured of the hooping-cough, which had therefore lasted a much shorter time than usual. Starting from this fact, M. Grieopenkerl administered ergot of rye to five children suffering from hooping-cough, four of whom, a year old, had been affected for three or four weeks, and the fifth, three years old, had been suffering for a year. In all a cure was nearly accomplished at the end of eight days of treatment. Later, in 1861, an epidemic of hooping-cough offered to the author a vast field of observation, and his experience now comprehends more than two hundred facts. The results of this investigation appear to vindicate to the ergot of rye an important place among the remedial means in hooping-cough. The failures in Dr. Grieopenkerl's hands were few, and they ought to be attributed to the employment of ergot of bad quality. The following formula has been definitively adopted by the author as the most suitable for giving a stable compound, and one divested of the irritant properties which powdered ergot possesses. Ergot in coarse powder, 20 to 30 grains, to be boiled for half an hour in water with an ounce of isinglass; to this an ounce and a half of powdered white sugar is to be added.

Dose, a teaspoonful every two hours for a child from five to seven years old. For younger children the quantity of ergot is to be reduced to ten or fifteen grains for the same quantity of syrup. It is necessary, during the whole of the treatment, to avoid scrupulously all articles of food which contain tannin.

Dr. Grieopenkerl recommends that this treatment should not be commenced until the beginning of the third week of the disease, and after all complications have been got rid of. He has remarked that the paroxysms are often aggravated during the first days of the employment of the ergot, but at the end of from five to ten days they diminish in frequency, and disappear the more rapidly in proportion as there is less concomitant pulmonary catarrh. The latter is in no respect modified by the ergot. The syrup of ergot has never been employed by Dr. Grieopenkerl for more than fifteen consecutive days; he suspends its administration at the end of that time, but resumes it in a fortnight, if the cough has not been sufficiently modified. He has never seen this treatment give rise to the symptoms of ergotism.—*Dublin Med. Press*, Jan. 6, 1864, from *Deutsche Klinik*.

16. *Influence of the Vapours disengaged from the matters used in the purification of Coal Gas over Hooping-Cough.*—M. COMMEREGE has presented to the Imperial Academy of Medicine a report on this subject, drawn up from the observation of the effects produced on 142 children affected with hooping-cough, who had been brought under the action of the gases in the gas works at St. Maudé. His conclusions are to the effect, that the treatment produces excellent results, and at all periods of the disorder. When it does not cure, it greatly ameliorates. In general, twelve *séances* are required for the cure; and each *séance* should be of two hours' duration. However young the patient, no danger results from the exposure to the gases. Then again we have Dr. BERTHOLLES, who informs the French Academy of Medicine of the effects observed to result from the inhalation of the vapours disengaged from the remains of the materials used in the purification of gas, by children having hooping-cough. “The register of the coal works at Ternes show that, during the past six months, 901 patients have been subjected to the vapour-treatment; and that of these